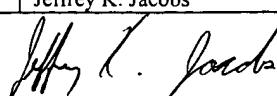
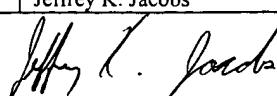
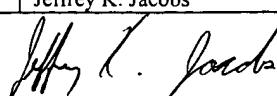


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22763 U.S.PTO

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.:	CE11125R
		Title:	First Inventor: Oprescu-Surcobe et al.
		WIRELESS COMMUNICATIONS NETWORK AND METHOD FOR ENABLING WIRELESS PRESENCE- BASED SERVICES	
		Express Mail Label No.:	ER380437422US

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)		Mail Stop Patent Application ADDRESS TO: Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450																												
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 18] (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R & D -Reference to sequence listing, a table, or computer program listing appendix -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4]</p> <p>5. Oath or Declaration [Total Sheets 3] a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CFR)</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies); or ii. <input type="checkbox"/> Paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>																														
ACCOMPANYING APPLICATION PARTS <p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PT-1449 Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>																														
<p>18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) of prior application No. _____ Prior application information: Examiner: _____ Art Unit: _____</p> <p>For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																														
<p>19. CORRESPONDENCE ADDRESS</p> <table border="1"> <tr> <td><input checked="" type="checkbox"/> Customer Number</td> <td>22917</td> <td>or</td> <td><input type="checkbox"/> Correspondence address below</td> </tr> <tr> <td>Name</td> <td colspan="3"></td> </tr> <tr> <td>Address</td> <td colspan="3"></td> </tr> <tr> <td>City</td> <td>State</td> <td colspan="2">Zip Code</td> </tr> <tr> <td>Country</td> <td>Telephone</td> <td>Fax</td> <td></td> </tr> <tr> <td>Name</td> <td colspan="2">Jeffrey K. Jacobs</td> <td>Registration No. 44,798</td> </tr> <tr> <td>SIGNATURE</td> <td colspan="2"></td> <td>Date April 13, 2004</td> </tr> </table>			<input checked="" type="checkbox"/> Customer Number	22917	or	<input type="checkbox"/> Correspondence address below	Name				Address				City	State	Zip Code		Country	Telephone	Fax		Name	Jeffrey K. Jacobs		Registration No. 44,798	SIGNATURE			Date April 13, 2004
<input checked="" type="checkbox"/> Customer Number	22917	or	<input type="checkbox"/> Correspondence address below																											
Name																														
Address																														
City	State	Zip Code																												
Country	Telephone	Fax																												
Name	Jeffrey K. Jacobs		Registration No. 44,798																											
SIGNATURE			Date April 13, 2004																											

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FEE TRANSMITTAL

Patent fees are subject to annual revision

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)

<i>Complete if Known</i>	
Application Number	
Filing Date	
First Named Inventor	Oprescu-Surcobe et al.
Examiner Name	
Group Art Unit	
TOTAL AMOUNT OF PAYMENT	Attorney Docket No. CE11125R

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number	50-2117
Deposit Account Name	Motorola, Inc.

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity
-----------------	-----------------

Fee	Fee	Fee	Fee
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Code	(\$)	Code	(\$)
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Fee Description

1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late Provisional filing
1053	130	1053	130	Non-English specification
1812	2520	1812	2520	For filing a request for ex parte Reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1480	2254	740	Extension for reply within fourth month
1255	2010	2255	1005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	165	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
1451	1510	1451	1510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive - unavoidable
1453	1330	2453	665	Petition to revive - unintentional
1501	1330	2501	665	Utility issue fee (or reissue)
1502	480	2502	240	Design issue fee
1503	640	2503	320	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of IDS
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))
1801	770	2801	385	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application
Other fee (specify) _____				
SUBTOTAL (3) (\$40.00)				

* Reduced by Basic Filing Fee Paid

2. EXTRA CLAIM FEES

Previously Paid**	Extra Claims	Fee from below	Fee Paid
33	- 20	= 13	X 18 = 234
2	- 3	= 0	X 86 =

Multiple Dependent

290 =

Large Fee Code	Entity Fee Code	Small Fee Code	Entity Fee Code	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	* Reissue independent claims over original patent
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$234.00)

**or number previously paid, if greater; For Reissues, see above.

SUBMITTED BY

Name (Print/Type) Jeffrey K. Jacobs

Complete (if applicable)

Registration No. 44,798 Telephone 847/576-5562

Signature

Date April 13, 2004

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Oprescu-Surcobbe et al. S/N: Unknown
CASE NO.: CE11125R Filed: April 13, 2004
ENTITLED: WIRELESS COMMUNICATIONS NETWORK AND METHOD FOR ENABLING
WIRELESS PRESENCE-BASED SERVICES

Motorola, Inc.
Intellectual Property Dept.
1303 E. Algonquin Road
Schaumburg, IL 60196

CERTIFICATE OF EXPRESS MAILING

Commissioner for Patents
P.O. BOX 1450
Alexandria, VA 22313-1450

Sir:

I certify that the above-referenced patent application was deposited, postage prepaid, as Express Mail having the mailing label number written below with the United States Postal Service addressed to:

MAIL STOP PATENT APPLICATION
Commissioner for Patents
P.O. BOX 1450
Alexandria, VA 22313-1450

on Tuesday, April 13, 2004

By: Nanette Orr

Signature 

Date: April 13, 2004

Mailing Label No.: ER380437422US